

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			09/20/00
RESPONSE FORMALITY REVIEW	EA		3-24-00

INDEX OF CLAIMS

.....	Rejected	N	Non-elected
.....	Allowed	I	Interference
(Through numeral)...	Canceled	A	Appeal
.....	Restricted	O	Objected

Final	Claim	
	Original	
1	✓	✓
2	✓	✓
3	✓	✓
4	✓	✓
5	✓	✓
6	✓	✓
7	✓	✓
8	✓	✓
9	✓	✓
10	✓	✓
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Claim		Date					
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Claim		Date						
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**If more than 150 claims or 10 actions
staple additional sheet here**

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